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MASTE MANIFESI Bioleman i handomylete Adress aft Co. 19503 S. Normandie Avenue Torrance, CA 90502 213 533-6677 K. L.	Anderson 722 M/S C	<u> </u>	A. Sta	te Manifest Docum 894 te Generator's ID A,H,Q,3,6	ent Number 76951
4. Generator's Phone () 5. Transporter 1 Company Name J.C.I. Environmental Services	6. US EPA ID Number C-A-D-0-5-8-0-1-8	3,6,7	D. Tra	te Transporter's ID neporter's Phone te Transporter's ID	(213)26
7. Transporter 2 Company Name	1111111	111	F. Trai	nsporter's Phone	
Designated Facility Name and Site Address Chem Tech Systems, Inc. 3650 E. 26th St.	10. US EPA ID Number		_	ility's Phone	10 13 13 16 1
Vernon,CA 90023	C-A-T-0-8-0-0-3-3	6 ₄ 8 ₄ 1 12. Cont	ainers	(213)268-	14. Unit
11. US DOT Description (Including Proper Shipping Name, H		No.	Type	Quantity	Wt/Vol State
*Waste Steam-Cleaning Water (California Regulated Waste Onl	y.)	0 0 1	TIT	0 4 0 0 0	EPA/C G C
b.			1	1111	EPA/C
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d. "					State EPA/C
			1		I .
15. Special Handling Instructions and Additional Information Guidef 31 Use gloves, goggles,	PROF	ILE #8	B-37		
Guide# 31 Use gloves, goggles, respirator.	Section Control of the Control of th	ILE #8 ER 138		No.	
Guide# 31 Use gloves, goggles, respirator.	It the contents of this consignment are in all respects in proper condition for the program in place to reduce the volument, or the practicable method of treatment, on the practicable method of treatment, or the practical method of the practical method o	ER 138 e fully and a or transport e and toxic storage, or enerator, i	ccurately by highway	ste generated to th	ne degree I have e to me which m
Guidef 31 Use gloves, goggles, respirator. 10—T 16. GENERATOR'S CERTIFICATION: I hereby declare the and are classified, packed, marked, and labeled, and an national government regulations. If I am a large quantity generator, I certify that I have a to be economically practicable and that I have selected present and future threat to human health and the envir generation and select the best waste management met. Printed/Typed Name Kris L. Anderson Agent for M.D.	the contents of this consignment are in all respects in proper condition for program in place to reduce the volum the practicable method of treatment, onment; OR, if I am a small quantity good that is available to me and that I signature	ER 138 e fully and a or transport e and toxic storage, or enerator, i	ccurately by highway	ste generated to th	ne degree I have e to me which m ort to minimize n
Guidef 31 Use gloves, goggles, respirator. 10-T 16. GENERATOR'S CERTIFICATION: I hereby declare the and are classified, packed, marked, and labeled, and an ational government regulations. If I am a large quantity generator, I certify that I have a to be economically practicable and that I have selected present and future threat to human health and the envir generation and select the best waste management met. Printed/Typed Name Kris L. Anderson Agent for M.D 17. Transporter 1 Acknowledgement of Receipt of Materials. Printed/Typed Name	the contents of this consignment are in all respects in proper condition for program in place to reduce the volum the practicable method of treatment; onment; OR, if I am a small quantity good that is available to me and that I Signature Signature Signature	ER 138 e fully and a or transport e and toxic storage, or enerator, i	ccurately by highway	ste generated to the steep of t	ne degree I have e to me which m ort to minimize n
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Guidef 31 Use gloves, goggles, respirator. 10-T 16. GENERATOR'S CERTIFICATION: I hereby declare the and are classified, packed, marked, and labeled, and an ational government regulations. If I am a large quantity generator, I certify that I have a to be economically practicable and that I have selected present and future threat to human health and the envir generation and select the best waste management met. Printed/Typed Name Kris L. Anderson Agent for M.D./ 17. Transporter 1 Acknowledgement of Receipt of Materials. Printed/Typed Name B. Transporter 2 Acknowledgement of Receipt of Materials. Printed/Typed Name	the contents of this consignment are in all respects in proper condition for program in place to reduce the volum the practicable method of treatment, onment; OR, if I am a small quantity gnod that is available to me and that I signature Signature Signature	e fully and a programmer of transport e and toxici storage, or enerator, I can afford	ccurately by highway disposanave man	ste generated to the licurrently available de a good faith eff	e degree I have e to me which mort to minimize n

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

Kris L. Anderson Agent for M.D.A.C.	Signature	2	- 939899
17. Transporter 1 Acknowledgement of Receipt of Materials			
Printed/Typed Name	Signature	11.1.1.	Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials Day Year Printed/Typed Name Signature

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature

DHS 8022 A (1/88) EPA 8700-22 (Rev. 9-88) Previous editions are obsolete.

CASE

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A

Do Not Write Below This Line

Month Day

Year